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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

	Authorized Committee	Office	e Use Only
NAME OF COMMITTEE (in full) TYPE OR PRII	NT ▼ Example: If typing, type over the lines.	12FE4M5	
Lynn Schott for Congress			
ADDRESS (number and street)	Center Drive, #150		
Check if different			
than previously reported. (ACC)		CA 92618	3
2. FEC IDENTIFICATION NUMBER ▼	CITY	STATE A	ZIP CODE
C C00577510	3. IS THIS REPORT NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT CA 46
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2)	(b) 12-Day PRE-Election Report for the: X Primary (12P) Convention (12C)	General (12G) Special (12S)	Runoff (12R)
October 15 Quarterly Report (Q3)	Election on 06 07	/ Y Y Y Y Y 2016	in the CA State of
January 31 Year-End Report (YE)	(c) 30-Day POST -Election Report for the	e:	
	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election on M M / D D	/ Y " Y " Y " Y	in the State of
5. Covering Period 04 01	/ Y Y Y Y Y 2016 through 05	M / D D / Y 18	Y Y Y 2016
I certify that I have examined this Report and	to the best of my knowledge and belief it is	true, correct and con	nplete.
Type or Print Name of Treasurer Jen Slater			
Signature of Treasurer Jen Slater	[Electronically Filed]	Date 05 /	23 /
NOTE: Submission of false, erroneous, or incomp	plete information may subject the person signing	g this Report to the pe	nalties of 2 U.S.C. §437g.
Office Use Only			EC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 27

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Lynn Schott for	Congress
-----------------	----------

05 18 2016 01 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 2110.00 30338.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 2110.00 30338.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 22255.27 56527.52 (from Line 17) (b) Total Offsets to Operating 0.00 153.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 22255.27 56374.52 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 10863.48 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 60923.86 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Lynn Schott for Congress

05 2016 04 01 2016 18 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 1250.00 21749.00 (i) Itemized (use Schedule A)..... 2689.00 360.00 (ii) Unitemized..... (iii) TOTAL of contributions 1610.00 24438.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 500.00 5900.00 (such as PACs)..... 0.00 0.00 The Candidate..... TOTAL CONTRIBUTIONS (other than loans) 2110.00 30338.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 15000.00 36900.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 15000.00 36900.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 153.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 67391.00 17110.00 (Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	22255.27	56527.52
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
0.	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	22255.27	56527.52
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	16008.75
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	17110.00
25.	SUBTOTAL (add Line 23 and Line 24)		33118.75
:6.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	22255.27
27.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	10863.48

FOR LINE NUMBER: PAGE 5 OF 27 Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c Detailed Summary Page 12 13a

ITEMIZED RECEIPTS 13b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lynn Schott for Congress Full Name (Last, First, Middle Initial) Shiou Lin Date of Receipt Mailing Address 7 Hillgrass 05 2016 03 City State Zip Code Transaction ID : INCA198 CA 92603 Irvine FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 1000.00 Name of Employer Occupation **OCTA** Marketing Manager Memo Item Receipt For: 2016 Election Cycle-to-Date | Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) Janet Huang Date of Receipt Mailing Address 8 Still Water 05 18 2016 City State Zip Code Transaction ID: INCA211 **Newport Coast** CA 92657 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Homemaker Memo Item None Receipt For: 2016 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... 1250.00 TOTAL This Period (last page this line number only).....

lm	age# 201605269017308282			
	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 27 (check only one) 11a 11b X 11c 11d 11d 12 13a 13b 14 15
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Lynn Schott for Congress			
Α.	Full Name (Last, First, Middle Initial) Jeffrey Lalloway for Irvine City Coun Mailing Address 603 E Alton Ave Ste G	cil		Date of Receipt
	City Santa Ana	State CA	Zip Code 92705	05 18 2016 Transaction ID : INCA210
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	500.00 Memo Item
	Receipt For: 2016 Primary General Other (specify)	Election Cy	ycle-to-Date 500.00	
В.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address City	State	Zip Code	M M / D D / Y Y Y Y
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	Memo Item
	Receipt For: Primary General Other (specify)	Election Cy	ycle-to-Date	
_	Full Name (Last, First, Middle Initial)			Date of Receipt
C.	Mailing Address			M M / D D / Y Y Y Y

Zip Code

State

City

SCHEDULE A	(FEC Form	3)
ITEMIZED REC	EIPTS	

FOR LINE NUMBER: PAGE 7 OF 27 Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c Detailed Summary Page 12 13b

X 13a Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lynn Schott for Congress Full Name (Last, First, Middle Initial) Lynn Schott - PERSONAL FUNDS Date of Receipt Mailing Address PO Box 60881 2016 05 City State Zip Code Transaction ID: PAYA174 CA 92602 Irvine FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 5000.00 Name of Employer Occupation Founders Academy Owner/Educator Memo Item Receipt For: 2016 Election Cycle-to-Date Primary General 37745.50 Other (specify) Full Name (Last, First, Middle Initial) Lynn Schott - PERSONAL FUNDS Date of Receipt Mailing Address PO Box 60881 05 2016 City State Zip Code Transaction ID: PAYA176 Irvine CA 92602 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 10000.00 Name of Employer Occupation Owner/Educator Founders Academy Memo Item Receipt For: 2016 Election Cycle-to-Date | Primary General 37745.50 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 15000.00 SUBTOTAL of Receipts This Page (optional)..... 15000.00 TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Use separate so for each category Detailed Summa Any information copied from such Reports and Statements may not be sold or or for commercial purposes, other than using the name and address of any possible statements.	ary Page used by any p	
NAME OF COMMITTEE (In Full) Lynn Schott for Congress	ontical committe	e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Capitol Tech Solutions Mailing Address 2131 Capitol Ave, #306		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code Sacramento CA 95816 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: House Disbursement For: 2016 Senate President Other (specify) State: District:	001 Category/ Type	Amount of Each Disbursement this Period 189.50 Memo Item Transaction ID : EXPB170
Full Name (Last, First, Middle Initial) Cardmember Services Mailing Address PO Box 94014 City State Zip Code Palatine IL 60094 Purpose of Disbursement Credit Card Payment - Printing Costs Candidate Name Office Sought: House Disbursement For: 2016 Senate President State: District:	006 Category/ Type	Date of Disbursement M M O D O O O O O O O O O O O O O O O O
Full Name (Last, First, Middle Initial) C. Orange IT Wizard Mailing Address 3103 S Bristol St, Unit 269 City State Zip Code Santa Ana CA 92704 Purpose of Disbursement Design, Web & Printing Costs Candidate Name Office Sought: House Senate President Other (specify)	003 Category/ Type	Date of Disbursement M M O4

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		LINE NUMBER: PAGE 9 OF 27 ck only one) X 17
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and			
\rangle	NAME OF COMMITTEE (In Full) Lynn Schott for Congress			
۱.	Full Name (Last, First, Middle Initial) VNCSC Tet Festival			Date of Disbursement
	Mailing Address 14351 Euclid Street, Suite 1R City State Garden Grove CA	Zip Code 92843		04 05 2016 Amount of Each Disbursement this Period
	Purpose of Disbursement Parade & Festival Costs Candidate Name	00 Cate	gory/	955.96 × Memo Item
	Office Sought: House Senate President State: Disbursement For Primary Other (s	General	pe	Transaction ID : PDTB14EXPB171
3.	Full Name (Last, First, Middle Initial) Cardmember Services Mailing Address PO Box 94014			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Palatine IL Purpose of Disbursement Misc Event & Office Costs - No Vendor Aggregating over \$2 Candidate Name	Cate	01 gory/	Amount of Each Disbursement this Period 625.76 X Memo Item
	Office Sought: House Senate President State: Disbursement For Primary Other (s	General	μe	Transaction ID: PDTB17EXPB171
) .	Full Name (Last, First, Middle Initial) Orange County Registrar of Voters Mailing Address 1300 S Grand Avenue			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	-	Тур	01 gory/	Amount of Each Disbursement this Period 1601.41 X Memo Item Transaction ID: PDTB16EXPB171
	Senate Primary President Other (s	General specify)		
				0.00

SUBTOTAL of Disbursements This Page (optional).....

TEMIZED DISBURSEMENTS Sue separate schedules for each category of the Detailed Summary Page				
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commending lumposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Lynn Schott for Congress Full Name (Last, First, Middle Initial) A, Frontline Strategies & Media LLC Mailing Address 344 E 16th Street City State Zip Code CA 92626 Purpose of Diabursement CAA 92626 Purpose of Diabursement For: 2016 Senate Primary General Disbursement State: District Full Name (Last, First, Middle Initial) A, Arthur Sanchez Mailing Address 27132 Via Bronca, #B City State Zip Code CA 92675 Purpose of Diabursement CA 92675 Full Name (Last, First, Middle Initial) Arthur Sanchez Date of Diabursement this Period Category/ Type Office Sought: House Senate Primary General Candidate Name Candidate Name Candidate Name District Full Name (Last, First, Middle Initial) Cardidate Name Category Type Office Sought: House Senate Primary General State: District Full Name (Last, First, Middle Initial) Category Type Office Sought: House Senate Primary General District CA 92692 Pripose of Diabursement Category Type Office Sought: House Senate Primary General District CA 92692 Pripose of Diabursement Category Type Office Sought: House Senate Primary General District CA 92692 Pripose of Diabursement Diabursement For: 2016 Senate Primary General Other (specify) Type Office Sought: House Senate Primary General District CA 92692 Pripose of Diabursement Diabursement For: 2016 Senate District CA 92692 Pripose of Diabursement Diabursement For: 2016 Senate Diabursement For: 2016 Senate Diabursement For: 2016 Category Type Office Sought: House Senate Diabursement For: 2016 Senate Diabursement For: 2016 Mailing Address 24062 Silverstre City Mac		•	for each category of the	(check only one) X 17 18 19a 19b
Lynn Schott for Congress Full Name (Last, First, Middle Initial) A Frontline Strategies & Media LLC Mailing Address 344 E 16th Street City State Zip Code Costa Mesa CA 92626 Pippose of Disbursement For: 2016 State: District: President CA 92675 Full Name (Last, First, Middle Initial) Arthur Sanchez Mailing Address 27132 Via Bronca, #B City State Zip Code CA 92675 Full Name (Last, First, Middle Initial) Arthur Sanchez Mailing Address 27132 Via Bronca, #B City San Juan Capistran CA 92675 Pippose of Disbursement Category/ Type Office Sought: House President President CA 92675 Full Name (Last, First, Middle Initial) Arthur Middle Initial Category/ Type Office Sought: District:				person for the purpose of soliciting contributions
A. Frontline Strategies & Media LLC Mailing Address 344 E 16th Street City State Zip Code CA 92626 Purpose of Disbursement Category Type Office Sought: House Disbursement For: 2016 Senate President State: District: Full Name (Last, First, Middle Initial) Arthur Sanchez Candidate Name Disbursement For: 2016 San Juan Capistran CA 92675 Purpose of Disbursement For: 2016 San Juan Capistran CA 92675 Purpose of Disbursement For: 2016 San Juan Capistran CA 92675 Purpose of Disbursement For: 2016 San Juan Capistran CA 92675 Purpose of Disbursement For: 2016 San Juan Capistran CA 92675 Purpose of Disbursement For: 2016 San Juan Capistran CA 92675 Purpose of Disbursement For: 2016 Senate President State: District: Full Name (Last, First, Middle Initial) Arthur McIntosh Mailing Address 24052 Silverstre City State Zip Code CA 92692 Primary General Disbursement For: 2016 Sitate: District: Full Name (Last, First, Middle Initial) Arthur McIntosh Mailing Address 24052 Silverstre City State Zip Code CA 92692 Purpose of Disbursement For: 2016 Category Type Office Sought: House Senate President Services Candidate Name Office Sought: House Senate President Services Candidate Name Office Sought: House Senate President Services Candidate Name Office Sought: House Senate President Senate Presi	\rangle	, ,	, .	
Arthur Sanchez Mailing Address 27132 Via Bronca, #B City State Zip Code San Juan Capistran CA 92675 Purpose of Disbursement Campaign Consulting Services Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Arthur McIntosh Mailing Address 24052 Silverstre City State Zip Code Category/ Type Other (specify) Date of Disbursement His Period Amount of Each Disbursement this Period Transaction ID: EXPB177 Date of Disbursement this Period Memo Item Transaction ID: EXPB177 Date of Disbursement this Period Memo Item Date of Disbursement this Period Amount of Each Disbursement this Period Od 08 / 2016 Amount of Each Disbursement this Period Memo Item Transaction ID: EXPB180 Transaction ID: EXPB180	A.	Frontline Strategies & Media LLC Mailing Address 344 E 16th Street City State Costa Mesa CA Purpose of Disbursement Campaign Consulting Services Candidate Name Office Sought: House Senate President President State: District:	92626 001 Category, Type 7: 2016 General	Amount of Each Disbursement this Period 3500.00 Memo Item
San Juan Capistran CA 92675 Purpose of Disbursement Campaign Consulting Services Candidate Name Category/ Type Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) City State Zip Code Mission Viejo CA Candidate Name City State Zip Code Mission Viejo CA Candidate Name Category/ Type Disbursement For: 2016 State Zip Code CA 92692 Purpose of Disbursement Campaign Consulting Services Candidate Name Disbursement For: 2016 Category/ Type Amount of Each Disbursement this Period Amount of Each Disbursement this Period Memo Item Transaction ID: EXPB180 Transaction ID: EXPB180	3.	Arthur Sanchez		M M / D D / Y Y Y
Arthur McIntosh Mailing Address 24052 Silverstre City State Zip Code Mission Viejo CA 92692 Purpose of Disbursement Campaign Consulting Services Office Sought: House Senate President State: District: Date of Disbursement Amount of Each Disbursement this Period Category/ Type Transaction ID: EXPB180		San Juan Capistran Purpose of Disbursement Campaign Consulting Services Candidate Name Office Sought: House Senate President Other (s	92675 001 Category, Type 7: 2016 General	850.00 Memo Item
Mission Viejo Purpose of Disbursement Campaign Consulting Services Office Sought: House Senate President Senate President State: District: Annount of Each Disbursement fills Fellod 375.00 Memo Item Transaction ID: EXPB180 Annount of Each Disbursement fills Fellod 4725.00	Э.	Arthur McIntosh		M M / D D / Y Y Y
4725.00		Mission Viejo Purpose of Disbursement Campaign Consulting Services Candidate Name Office Sought: House Senate President Disbursement For Primary Other (s	001 Category, Type	375.00 Memo Item
		I I		4725.00

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 27 (check only one)
	y information copied from such Reports and Statements n	nay not be sold or used by any	
<u> </u>	NAME OF COMMITTEE (In Full) Lynn Schott for Congress	author of any pointed commit	
۹.	Full Name (Last, First, Middle Initial) Campaign Compliance Group Mailing Address 9070 Irvine Center Drive, #150		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement Financial Analyst	92618	1200.00
	Candidate Name	Category. Type	
	Office Sought: House Senate President Disbursement For Primary Other (s	r: 2016 General	Transaction ID : EXPB186
	State: District:		
3.	Full Name (Last, First, Middle Initial) Lynn Schott - PERSONAL FUNDS Mailing Address PO Box 60881		Date of Disbursement M M / D D / Y Y Y Y 04 15 2016
	City State	Zip Code	Amount of Each Disbursement this Period
	Irvine CA	92602	Amount of Each dispursement this Period
	Purpose of Disbursement Campaign Consulting Services	001	375.00
	Candidate Name	Category. Type	Memo Item Transaction ID : EXPB190
	Office Sought: House Senate President Disbursement For Primary Other (s	General	
	State: District:		
	Full Name (Last, First, Middle Initial)		
Э.	Arthur McIntosh		Date of Disbursement
	Mailing Address 24052 Silverstre	in Code	04 15 2016
		ip Code 02692	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Consulting Services	001	375.00
	Candidate Name	Category. Type	
	Office Sought: House Senate President Disbursement For Primary Other (s	General	Transaction ID : PDTB2EXPB190
	State: District:		
c	IJRTOTAL of Dishursements This Page (ontional)		1575.00

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 12 OF 27 (check only one)
	Detailed Summary Page	20a 20b 20c 21
Any information copied from such Reports and Statements or for commercial purposes, other than using the name are		
NAME OF COMMITTEE (In Full)		
Lynn Schott for Congress		
Full Name (Last, First, Middle Initial) A. Lynn Schott - PERSONAL FUNDS		Date of Disbursement
Mailing Address PO Box 60881		04 15 2016
City State Irvine CA	Zip Code 92602	Amount of Each Disbursement this Period
Purpose of Disbursement Campaign Consulting Services		375.00
Campaign Consulting Services Candidate Name	001 Category/	Memo Item
Office Sought: House Disbursement	Type	Transaction ID : EXPB188
Senate Prim President Othe		
State: District: Full Name (Last, First, Middle Initial)		
3. Arthur McIntosh		Date of Disbursement
Mailing Address 24052 Silverstre		04 / D D / Y Y Y Y Y Y 15
City State Mission Viejo CA	Zip Code 92692	Amount of Each Disbursement this Period
Purpose of Disbursement Campaign Consulting Services	001	375.00
Candidate Name	Category/ Type	Transaction ID : PDTB3EXPB188
	For: 2016	
State: District: Full Name (Last, First, Middle Initial)		
C. Arthur Sanchez		Date of Disbursement
Mailing Address 27132 Via Bronca, #B		04 / D D / Y Y Y Y Y 19 19 19 19 19 19 19 19 19 19 19 19 19
City State San Juan Capistran CA	Zip Code 92675	Amount of Each Disbursement this Period
Purpose of Disbursement Campaign Consulting Services	92675	850.00
Candidate Name	Category/ Type	
Office Sought: House Senate President Disbursement Prim Othe	For: 2016	Transaction ID : EXPB184
State: District:	••	
SUBTOTAL of Disbursements This Page (optional)		1225.00
2 2 (2)	******	, ,

SC	CHEDULE B (FEC Form 3)	Use separate schedule		FOR LINE NUMBER: PAGE 13 OF 27 (check only one)
T	EMIZED DISBURSEMENTS	for each category of t Detailed Summary Pag	he	X 17
	y information copied from such Reports and Statements manner for commercial purposes, other than using the name and			
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	Lynn Schott for Congress			
۹.	Full Name (Last, First, Middle Initial) Arthur McIntosh			Date of Disbursement
	Mailing Address 24052 Silverstre			04 24 2016
	City State Mission Viejo CA	Zip Code 92692		Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Consulting Services	92092	001	375.00
	Candidate Name	Cá	ategory/	Memo Item
	Office Sought: House Senate President Disbursement For Primary Other (s	General	Type	Transaction ID : EXPB181
	State: District:			
3.	Full Name (Last, First, Middle Initial) Ashley Chavez			Date of Disbursement
	Mailing Address 18 Bowie Place			04 25 2016
	City State Irvine CA	Zip Code 92602		Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Staff Wages		001	359.04
	Candidate Name	Ca	ategory/ Type	Memo Item Transaction ID : EXPB195
	Office Sought: House Senate President Disbursement For Primary Other (s	General		
	State: District:			
Э.	Full Name (Last, First, Middle Initial) Ashley Chavez			Date of Disbursement
	Mailing Address 18 Bowie Place			04 / D D / Y Y Y Y Y Y 29 2016 _
		p Code 2602		Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Staff Wages		001	240.12
	Candidate Name	Ca	ategory/ Type	Memo Item
	Office Sought: House Senate President Disbursement For Primary Other (s	General		Transaction ID : EXPB196
	State: District:			
9	IIRTOTAL of Dishursements This Page (ontional)			974.16

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	CHEDULE B (FEC FO EMIZED DISBURSEN	-	Use separate scl for each categor Detailed Summar	y of the	FOR LINE NUMBER: PAGE 14 OF 27 (check only one) X 17
					person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Lynn Schott for Congr				
Α.	Full Name (Last, First, Middle Ir Orange IT Wizard	itial)			Date of Disbursement
	Mailing Address 3103 S Bristol	St, Unit 269			05 04 2016
	City Santa Ana	State CA	Zip Code 92704		Amount of Each Disbursement this Period
	Purpose of Disbursement Printing & Mailing Costs			004	1377.51 Memo Item
	Candidate Name			Category/ Type	- 🗀
	Office Sought: House Senate Presiden State: District:	Disbursement For Primary Other (s	General		
В.	Full Name (Last, First, Middle In Arthur Sanchez Mailing Address 27132 Via Bror				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code		Amount of Each Disbursement this Period
	San Juan Capistran CA 92675 Purpose of Disbursement Campaign Consulting Services			001	850.00
	Candidate Name			Category/ Type	Memo Item Transaction ID : EXPB203
	Office Sought: House Senate Presiden	Disbursement For Primary t Other (s	General		
	State: District: Full Name (Last, First, Middle In	itial)			
C.	Frontline Strategies &	Media LLC			Date of Disbursement
	Mailing Address 344 E 16th Stre	eet			05 D D / Y Y Y Y 10 10 10 10 10 10 10 10 10 10 10 10 10
	City Costa Mesa		p Code 2626		Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Consulting Services 001			3500.00 Memo Item	
	Тур			Category/ Type	Transaction ID : EXPB201
	Office Sought: House Senate Presiden	Disbursement For Primary Other (s	General		
	State: District:				

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS			Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 15 OF 27 (check only one) X 17
or	for commercial p	purposes, other than using the name and			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	Lynn Schot	tt for Congress			
	Full Name (Last, Arthur McIr	First, Middle Initial) ntosh			Date of Disbursement
	Mailing Address	24052 Silverstre			05 10 2016
	City	State CA	Zip Code		Amount of Each Disbursement this Period
	Mission Viejo Purpose of Disb Campaign Cons		92692	001	375.00
	Candidate Name			Category/ Type	Memo Item Transaction ID : EXPB206
	Office Sought:	House Disbursement For Primary President Other (
_	State: Full Name (Last,	First, Middle Initial)			
В.	, ,				Date of Disbursement
	Mailing Address				
	City	State	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disb				Memo Item
	Candidate Name			Category/ Type	
	Office Sought:	House Disbursement For Senate Primary Other (
	State:	District:			
C.	Full Name (Last,	First, Middle Initial)			Date of Disbursement
	Mailing Address				M M / D D / Y Y Y Y
	City	State Z	Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement					Memo Item
Candidate Name			Category/ Type	_	
	Office Sought:	House Disbursement For Senate Primary Other (
	State:	District:	• •		
S		bursements This Page (optional)			375.00

TOTAL This Period (last page this line number only).....

22255.27

Use separate schedule(s)

FOR LINE NUMBER:

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LOANS		Detailed Summary Pa				
NAME OF COMMITTEE (In Full) Lynn Schott for Congress		Transaction ID : PAYC2				
LOAN SOURCE Full Name (Last, First, Mic Lynn Schott - PERSONAL FUND	*	Memo Item	Election: 2016 Primary General			
Mailing Address PO Box 60881			Other (specify)			
City	State ZIP Cod	le				
Irvine	CA 92602					
Original Amount of Loan 900.00	Cumulative Payment To I	Date Bal	ance Outstanding at Close of This Period 900.00			
TERMS			1 1			
Date Incurred M 05	Date Due	Interest Rat	secured: 00 % (apr) Yes No			
List All Endorsers or Guarantors (if any) t	o Loan Source					
1. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:	7 7			
2. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:	7			
3. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:	7 9 8			
4. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:	9			
SUBTOTALS This Period This Page (optional). TOTALS This Period (last page in this line only			900.00			
Carry outstanding balance only to LINE 3, Scl	nedule D. for this line. If n	o Schedule D. carry for	ward to appropriate line of Summary			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 17

	13a
X	13b

DANS			for each category of Detailed Summary P		(check only one)	×	13a 13b
AME OF COMMITTEE (In Ful	,		Transa	action	ID : PAYC25		1.02
LOAN SOURCE Full Nam Lynn Schott - PERS	e (Last, First, Midd	•	Memo Item		ction: 2016 Primary		
Mailing Address PO Box 60881					General Other (specify) ▼		
City		State ZIP Cod	de				
Irvine		CA 92602					
Original Amount of Loan		Cumulative Payment To	Date Ba	alance	Outstanding at Close of	This	Period
7	1000.00		0.00		10	00.00	0
Date Incurre	ed 2015 M	Date Due	Interest Ra	ate 0.00	Secur % (apr)	red:	X
List All Endorsers or Gua		Loan Source	Name of Employee				
1. Full Name (Last, First, I	Middle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	y		
2. Full Name (Last, First, M	fiddle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:	-	9		
3. Full Name (Last, First, M	1iddle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	у		
4. Full Name (Last, First, N	fliddle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	· · · · · · · ·		
SUBTOTALS This Period This	Page (optional)		>		, 10	00.00	0
FOTALS This Period (last pag	le in this line only)				7 7 7	_	
Carry outstanding balance or	nly to LINE 3, Sche	dule D, for this line. If	no Schedule D, carry fo	rward	to appropriate line of	Sum	mary.

Use separate schedule(s)

PAGE 18 OF

OANS	-		for each category of Detailed Summary P	the (check only one) 13a
IAME OF COMMITTEE (In Fu	,		Transa	action ID : PAYC47
LOAN SOURCE Full Nar Lynn Schott - PERS	•	•	Memo Item	Election: 2016 Primary General
Mailing Address PO Box 60881				Other (specify) ———————————————————————————————————
City		State ZIP	Code	
Irvine		CA 9260	02	
Original Amount of Loan		Cumulative Payment	To Date Ba	alance Outstanding at Close of This Period
2 2	5000.00		0.00	5000.00
TERMS Date Incur M 11 M / P 16 D /	^Y 2015 ^Y	Date Du	Y None	Secured: 0.00 (apr) Yes No
List All Endorsers or Gu	, ,,,	o Loan Source		
1. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9
3. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period Th	is Page (optional).		·····	5000.00
TOTALS This Period (last pa		•		
Carry outstanding balance of	only to LINE 3, Sch	neaule D, for this line.	IT no Schedule D, carry fo	rward to appropriate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

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	13a
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OANS		for each category of Detailed Summary Pa	
IAME OF COMMITTEE (In Fo	•	Transa	ction ID : PAYC69
, .			
Lynn Schott - PERS	ne (Last, First, Middle Initial) SONAL FUNDS	Memo Item	Election: 2016 Primary General
Mailing Address PO Box 60881			Other (specify)
City	State ZIF	P Code	
Irvine	CA 92	2602	
Original Amount of Loan	Cumulative Paymer		ance Outstanding at Close of This Period
	3000.00	0.00	3000.00
Date Incur	red Date		te Secured:
List All Endorsers or Gu	arantors (if any) to Loan Source		Yes No
Full Name (Last, First,		Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7 7 7 7 7
4. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7 7 7 7
SUBTOTALS This Period Th	is Page (optional)	·····	3000.00
FOTALS This Period (last pa	ge in this line only)		, , , , , , , , , , , , , , , , , , , ,
Carry outstanding balance of	only to LINE 3, Schedule D, for this line	e. If no Schedule D, carry for	ward to appropriate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 20 OF

DANS			Detailed Summa		(check only one	e)	13 X 13	
AME OF COMMITTEE (In Full			Tı	ransaction	ID : PAYC72		-	
LOAN SOURCE Full Name	•	nitial)	Memo Item		ction: 2016 Primary General			
Mailing Address PO Box 60881					Other (specify)	•		
City	Sta	ate ZIP Co	de					
Irvine	(CA 92602						
Original Amount of Loan	C	Cumulative Payment To	Date	Balance	Outstanding at Cl	ose of Th	is Pe	riod
	3000.00	9	0.00		, ,	3000.	00	
TERMS Date Incurred M 02	ž016 ^Y	Date Due	Interes None	st Rate	% (apr)	Secured:	X	NIa
List All Endorsers or Guar	antors (if any) to L	oan Source				Yes		No
1. Full Name (Last, First, N	Middle Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	,		-]	
2. Full Name (Last, First, M	iddle Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:		,]	
3. Full Name (Last, First, M	iddle Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	7]	
4. Full Name (Last, First, M	iddle Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:			-]	
SUBTOTALS This Period This	Page (optional)		·····		7	3000.0	00	
FOTALS This Period (last page	e in this line only)		·····		7 7		_	
Carry outstanding balance on	v to LINE 3. Sched	ule D. for this line. If	no Schedule D. car	rv forward	to appropriate li	ne of Sur	nmai	rv.

Use separate schedule(s)

FOR LINE NUMBER:

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OANS		for each category of Detailed Summary Pa	
IAME OF COMMITTEE (In Fi	•	Transa	action ID : PAYC111
, ,	me (Last, First, Middle Initial)		T Electrical and
Lynn Schott - PERS		Memo Item	Election: 2016 Primary General
Mailing Address PO Box 60881			Other (specify) \blacktriangledown
City	State ZI	P Code	
Irvine	CA 9	2602	
Original Amount of Loan	Cumulative Payme	ent To Date Bal	lance Outstanding at Close of This Period
	4000.00	0.00	4000.00
Date Incur	red Date		te Secured:
List All Endorsers or Gu	arantors (if any) to Loan Source		Yes No
Full Name (Last, First,		Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 1
2. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9 9
3. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period Th	is Page (optional)	·····	4000.00
FOTALS This Period (last pa	ge in this line only)		, , , , , , , , , , , , , , , , , , , ,
Carry outstanding balance of	only to LINE 3, Schedule D, for this lir	ne. If no Schedule D, carry for	ward to appropriate line of Summary.

Use separate schedule(s)

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OANS		for each category of Detailed Summary Pa	
IAME OF COMMITTEE (In F	•	Transa	ction ID : PAYC127
Lynn Schott for Cong	ress		
LOAN SOURCE Full Name Lynn Schott - PER	ne (Last, First, Middle Initial) SONAL FUNDS	Memo Item	Election: 2016 Primary General
Mailing Address PO Box 60881			Other (specify)
City	State ZII	P Code	
Irvine	CA 92	2602	
Original Amount of Loan	Cumulative Payme 5000.00	nt To Date Bal	ance Outstanding at Close of This Period 5000.00
	0000.00	0.00	3000.00
Date Incur	red Date		.00 % (apr)
List All Endorsers or Gu	arantors (if any) to Loan Source		Yes No
1. Full Name (Last, First	, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9 9
4. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9 9
SUBTOTALS This Period Th	is Page (optional)	·····	5000.00
TOTALS This Period (last pa	age in this line only)		, , , , , , , , , , , , , , , , , , , ,
Carry outstanding balance	only to LINE 3, Schedule D, for this lin	e. If no Schedule D, carry for	ward to appropriate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

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OANS		for each category of Detailed Summary Pa		
IAME OF COMMITTEE (In F	•	Transa	ection ID : PAYC174	
_ynn Schott for Cong	ress			
LOAN SOURCE Full Name Lynn Schott - PER	ne (Last, First, Middle Initial) SONAL FUNDS	Memo Item	Election: 2016 Primary General	
Mailing Address PO Box 60881			Other (specify)	
City	State ZII	P Code		
Irvine	CA 92	2602		
Original Amount of Loan	Cumulative Payme 5000.00	nt To Date Bal	ance Outstanding at Close of This Period 5000.00	
	3000.00	0.00	5000.00	
Date Incur	red Date		.00 % (apr)	
List All Endorsers or Gu	arantors (if any) to Loan Source		Yes No	
1. Full Name (Last, First,	, Middle Initial)	Name of Employer		
Mailing Address		Occupation		
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9 9	
2. Full Name (Last, First,	Middle Initial)	Name of Employer		
Mailing Address		Occupation		
City	State ZIP Code	Amount Guaranteed Outstanding:	7 7 7	
3. Full Name (Last, First,	Middle Initial)	Name of Employer		
Mailing Address		Occupation		
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9 9	
4. Full Name (Last, First,	Middle Initial)	Name of Employer		
Mailing Address		Occupation		
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9 9	
SUBTOTALS This Period This Page (optional)				
FOTALS This Period (last pa	age in this line only)		, , , , , , , , , , , , , , , , , , , ,	
Carry outstanding balance of	only to LINE 3, Schedule D, for this lin	e. If no Schedule D, carry for	ward to appropriate line of Summary.	

Use separate schedule(s)

FOR LINE NUMBER:

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Y	13h

OANS		for each category of Detailed Summary Pa	
IAME OF COMMITTEE (In Full)		Transa	ction ID : PAYC176
_ynn Schott for Congre	SS		
LOAN SOURCE Full Name Lynn Schott - PERSO		Memo Item	Election: 2016 Primary General
Mailing Address PO Box 60881			Other (specify)
City	State	ZIP Code	
Irvine	CA	92602	
Original Amount of Loan	Cumulative Payr	ment To Date Bal	ance Outstanding at Close of This Period 10000.00
9 9	3	3	10000.00
Date Incurred	1 Da	Interest Rat	.00 % (apr)
List All Endorsers or Guara	antors (if any) to Loan Source		Yes No
1. Full Name (Last, First, M	liddle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9 9
2. Full Name (Last, First, Mi	ddle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7 9 9
3. Full Name (Last, First, Mi	ddle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9 9
4. Full Name (Last, First, Mi	ddle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period This	Page (optional)		10000.00
FOTALS This Period (last page	e in this line only)		36900.00
Carry outstanding balance onl	y to LINE 3, Schedule D, for this	line. If no Schedule D, carry for	ward to appropriate line of Summary.

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

25 OF PAGE FOR LINE NUMBER (check only one)

:		
		9
	X	10

NA	ME OF COMMITTEE (In Full)		
L	ynn Schott for Congress		
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of D	ebt (Pur

	ynn Schott for Congres	SS		
T	A. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor		Nature of Debt (Purpose):
	Campaign Compliance Group			Financial Analyst
ŀ	Mailing Address 9070 Irvine Center Drive, #150			
	9070 Irvine Center Drive, #150			
Ī	City State	Zip Code		
	Irvine	CA	92618	
	Outstanding Balance Beginning This Period			Transaction ID : PAYD205
	0.00			
	Amount Incurred This Period	Pavr	nent This Period	Outstanding Balance at Close of This Period
	1200.00		0.00	1
	1200.00	7	0.00	1200.00
ľ	B. Full Name (Last, First, Middle Initial) of Debtor o	r Creditor		Nature of Debt (Purpose):
	Cardmember Services			Credit Card Payment - Printing Costs
ŀ	Mailing Address PO Rox 94014			_
	Mailing Address PO Box 94014			
ĺ	City State	Zip Code		
	Palatine	IL	60094	
	Outstanding Balance Beginning This Period			Transaction ID : PAYD123
	7464.10			
	Amount Incurred This Period	Payr	nent This Period	Outstanding Balance at Close of This Period
	0.00		7464.10	0.00
	3.00	7		
Ì	C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
	Cardmember Services			Credit Card Charges/Payment
ŀ	Mailing Address PO Box 94014			_
	FO BOX 94014			
	City	State	Zip Code	
-	Palatine	IL	60094	Transaction ID DAYD400
	Outstanding Balance Beginning This Period			Transaction ID : PAYD168
	13114.92			
	Amount Incurred This Period	Payr	ment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	13114.92
	7 7 7	7	7	7 7 7
				14314.92
1)	SUBTOTALS This Period This Page (optional)		>	14314.32
2)	TOTALS This Period (last page this line number or	nlv)	•	
_,	2 , , , ,	,,		, , , , , , , , , , , , , , , , , , , ,
3)	TOTAL OUTSTANDING LOANS from Schedule C	(last page on	ly)	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
4)	ADD 2) and 3) and carry forward to appropriate lin	ne of Summa	ry Page (last page only)	
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SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 26 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

NAME OF COMMITTEE (In Full)
Lvnn Schott for Congress

Lynn Schott for Congres	SS	
A. Full Name (Last, First, Middle Initial) of Debtor Cardmember Services		Nature of Debt (Purpose): Credit Card Payment
Mailing Address PO Box 94014		-
City State Palatine	Zip Code IL 60094	_
Outstanding Balance Beginning This Period		Transaction ID : PAYD214
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
8863.44	0.00	8863.44
B. Full Name (Last, First, Middle Initial) of Debtor of Lynn Schott - PERSONAL FUNDS		Nature of Debt (Purpose): Printing & Office Suplies
Mailing Address PO Box 60881		-
City State Irvine	Zip Code CA 92602	-
Outstanding Balance Beginning This Period		Transaction ID : PAYD4
485.90		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	485.90
C. Full Name (Last, First, Middle Initial) of Debtor Lynn Schott - PERSONAL FUNDS		Nature of Debt (Purpose): Campaign Consulting Services
Mailing Address PO Box 60881		-
City Irvine	State Zip Code CA 92602	-
Outstanding Balance Beginning This Period	02002	Transaction ID : PAYD6
375.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	375.00	0.00
4) CUPTOTALO Tiris Poris d'Elia Pores (estimat)		9349.34
1) SUBTOTALS This Period This Page (optional)		7 7 7 7
2) TOTALS This Period (last page this line number of	only)	
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page only)	
4) ADD 2) and 3) and carry forward to appropriate I	ine of Summary Page (last page only)	7 7 7 7

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(Use separate

PAGE 27 OF

LINE NUMBER:		
k only one)		9
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EBTS AND OBLIGATIONS			for each	(check only one) 9
ccluding Loans			numbered line)	X 10
IAME OF COMMITTEE (In Full)				
Lynn Schott for Congre	ess			
A. Full Name (Last, First, Middle Initial) of Debte	or or Creditor		I	Debt (Purpose):
Lynn Schott - PERSONAL FUNI	DS		Campaign	Consulting Services
Mailing Address PO Box 60881				
City State	Zip Code CA	92602		
Outstanding Balance Beginning This Period	- OA	32002	Transacti	on ID : PAYD7
375.00				
Amount Incurred This Period	Paym	ent This Period	Outstandi	ng Balance at Close of This Period
0.00		375.0	00	0.00
B. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of C	Debt (Purpose):
Lynn Schott - PERSONAL FUNE			Misc Office	e & Meal Costs - No Vendor
	-		aggregatin	g over \$200
Mailing Address PO Box 60881				
City State	Zip Code			
Irvine	CA	92602		
Outstanding Balance Beginning This Period			Transacti	on ID : PAYD10
59.60				
Amount Incurred This Period	Paym	ent This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	00	59.60
ap ap				7
C. Full Name (Last, First, Middle Initial) of Debte			Nature of D	Debt (Purpose):
Lynn Schott - PERSONAL FUNI	JS		Faraue Fe	:C
Mailing Address PO Box 60881				
City	State	Zip Code		
Irvine	CA	92602		
Outstanding Balance Beginning This Period			Transact	ion ID : PAYD95
300.00				
Amount Incurred This Period	Dover	ent This Period	Outstandi	ng Balance at Close of This Period
	rayiii			
0.00		0.0	00	300.00
substotals This Period This Page (optional)			▶	359.60
N. TOTALO This Decircle floor and the second				24023.86
2) TOTALS This Period (last page this line number	oniy)			7
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page only	<i>'</i>)	▶	36900.00

ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

60923.86